

# MISSOURI DIVISION OF HEALTH - STANDARD CERTIFICATE OF DEATH

DEPARTMENT OF PUBLIC HEALTH AND WELFARE

63-042522  
STATE FILE NUMBER

DO NOT WRITE  
ON THIS STUB

AMENDED

Registration District No. 326 Primary Registration District No. 4482 Registrar's No. 154

FILED OCT 28 1963

1. PLACE OF DEATH a. COUNTY <b>Scotland</b>		2. USUAL RESIDENCE (Where deceased lived. If institution; Residence before admission) a. STATE <b>Mo.</b> b. COUNTY <b>Scotland</b>	
b. CITY (If outside corporate limits, give TOWNSHIP only) <b>Memphis</b>		c. CITY OR TOWN <b>Memphis</b>	
c. FULL NAME OF (If NOT in hospital, give location) HOSPITAL OR INSTITUTION <b>Community Home</b>		d. STREET ADDRESS (If outside, give location)	

3. NAME OF DECEASED (Type or print) <b>Thomas Elmer Richardson</b>			4. DATE OF DEATH <b>Oct. 19, 1963</b>		
5. SEX <b>M</b>	6. COLOR OR RACE <b>W</b>	7. Married <input type="checkbox"/> Never Married <input type="checkbox"/> Widowed <input checked="" type="checkbox"/> Divorced <input type="checkbox"/>	8. DATE OF BIRTH <b>1/2/1887</b>		
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) <b>Farming</b>			11. BIRTHPLACE (City and state or country) <b>Elvaston, Illinois</b>		
13a. FATHER'S NAME <b>Madison B Richardson</b>			14. NAME OF HUSBAND OR WIFE <b>Florence Richardson</b>		
15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) <b>no</b>			17. INFORMANT <b>Mrs. Ray Parrish Gorin, Mo.</b>		

18. CAUSE OF DEATH (Enter only one cause per line) PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (a) <b>Chronic Myocarditis</b>		INTERVAL BETWEEN ONSET AND DEATH
DUE TO (b) <b>Arteriosclerosis</b>		
DUE TO (c)		
PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal disease condition given in PART I (a)		PART III. If deceased was female was there a pregnancy in last 90 days. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown

19. WAS AUTOPSY PERFORMED? YES <input type="checkbox"/> NO <input type="checkbox"/>	20a. ACCIDENT <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/>	20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in PART I or PART II of item 18.)	
20c. TIME OF INJURY Hour a.m. p.m.	20d. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>		
20e. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)		20f. CITY, TOWN, OR LOCATION	STATE
21. I attended the deceased from <b>Jan. 30 - 62</b> to <b>10 - 20 - 63</b> and last saw him alive on <b>10 - 19 - 63</b> Death occurred at <b>2</b> p.m. on the date stated above, and to the best of my knowledge, from the causes stated.			
22a. SIGNATURE <b>A. M. Keethler</b>		22b. ADDRESS <b>Memphis Mo</b>	22c. DATE SIGNED <b>10-21-63</b>
23a. BURIAL, CREMATION, REMOVAL (Specify) <b>Burial</b>	23b. DATE <b>Oct. 21, 1963</b>	23c. NAME OF CEMETERY OR CREMATORY <b>Bible Grove Cemetery</b>	
24. FUNERAL DIRECTOR <b>GERTH &amp; BASKETT</b>		25. DATE RECD. BY LOCAL REG. <b>10-25-63</b>	26. REGISTRAR'S SIGNATURE <b>Wm. E. Purner</b>

(Licensed Embalmer's Statement on Reverse Side)

USE BLACK INK  
OR  
TYPEWRITER RIBBON

AMENDMENTS ON THIS RECORD ARE AS FOLLOWS

INSTEAD OF

SHOULD READ

ITEM NO.

DOCUMENT

BY AFFIDAVIT OF

MEDICAL CERTIFICATION

VS 300  
Rev. 4/59  
1 0990  
2 0990  
3  
4 0  
5 2  
6  
7 1  
8  
9 4221  
10  
11  
12 86-2  
13 10

**STATEMENT BY LICENSED EMBALMER**

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me,  
 or by \_\_\_\_\_, Student Embalmer No. \_\_\_\_\_  
 working under my personal supervision.

Student \_\_\_\_\_  
 Signature of Student Embalmer

Signed George Keith

Licensed Embalmer No. 5091

P. O. Address Memphis, MO

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license).  
 If embalmed by a STUDENT, he also shall sign in his OWN handwriting.  
 If this body is not embalmed, fact should be so stated above.